

DOCKET FILE COPY ORIGINAL

ORIGINAL  
RECEIVED

JUL 12 1993

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

Before The  
FEDERAL COMMUNICATIONS COMMISSION  
Washington, D.C. 20554

In re Applications of	)	MM DOCKET NO. 93-127
	)	
JANICE M. SCANTLAND	)	BPH-920113MC
	)	
ROBERT G. CASAGRANDE	)	BPH-920115ME
	)	
For Construction Permit for	)	
New FM Station on 104.3 MHz	)	
at Richwood, Ohio	)	

To: The Hon. Arthur I. Steinberg  
Administrative Law Judge

ERRATUM TO  
OPPOSITION TO PETITION TO ENLARGE ISSUES

In the opposition to petition to enlarge issues filed July 6, 1993, at 15 of the text we indicated that we were submitting as Exhibit 8 copies of annual employment reports for 1991 for all six stations formerly owned by M.M. Group, Inc. This should be corrected to state that we were submitting as Exhibit 8 copies of transmittal letters from then communications counsel to the FCC filing annual employment reports for 1991 for all six stations and that Exhibit 8 also includes copies of the annual employment reports themselves for the three stations currently licensed to Tel Lease, Inc. Moreover it should be noted that Exhibit 8 contains duplicate copies of the 1991 annual employment report for stations WNRJ(AM)-WTLT(FM), one of which bears the

Commission's "received stamp" (copy attached for handy reference).

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "Gene A. Bechtel", is written over a horizontal line.

Gene A. Bechtel

Bechtel & Cole, Chartered  
Suite 250, 1901 L Street, N.W.  
Washington, D.C. 20036  
Telephone 202-833-4190  
Telecopier 202-833-3084

Counsel for Robert G. Casagrande

July 12, 1993

JUL- 3-93 SAT 13:32

WWHT/WTLT

FAX NO. 6148467385

P. 10

JUL- 2-93 FRI 16:57

WWHT/WTLT

FAX NO. 6148467385

P. 01

Federal Communications Commission  
Washington, D.C. 20554BROADCAST STATION  
ANNUAL EMPLOYMENT REPORT 1991Approved by OAS  
3000-0120  
Expires 6/30/93

## SECTION I

(For FCC Use Only)

Code No.

06950

A. Name of Licensee or Permittee  M.M. GROUP, INC.	B. Address  7001 Discovery Boulevard Dublin, OH 43017
--	--

## SECTION II

## A. TYPE OF RESPONDENT (check ONLY one)

COMMERCIAL BROADCAST STATION

NONCOMMERCIAL BROADCAST STATION

HEADQUARTERS

AM ☐ AMTV ☐ TVER ☐ Educational AM or FM RadioHC ☐FM ☐ FMLP ☐ Low Power TVET ☐ Educational TVAF ☒ Combined AM & FM  
in same area (must file  
a combined report)IN ☐ International

RECEIVED

JUN 3 - 1991

B. List call letters and location(s) of included stations. AM station is to be listed first in a combined report. List call letters for each station if changed since last 395-B report.

FEDERAL COMMUNICATIONS COMMISSION  
OFFICE OF THE SECRETARY

CURRENT CALL LETTERS	LOCATION(S)	FORMER CALL LETTERS
WNRJ-AM	Circleville, Ohio	WNRE
WTLT (FM)	Circleville, Ohio	

## SECTION III

## A. PAY PERIOD COVERED BY THIS REPORT (DATE)

March 31, 1991

## B. CHECK APPLICABLE BOX

☐ Fewer than five full-time employees during the selected payroll period (Complete page one only and certification statement and return to FCC)☒ Five or more full-time employees during selected payroll period (Complete all sections of form and certification statement and return to FCC)

## SECTION IV CERTIFICATION

This report must be certified, as follows: (a) By licensee, if an individual; (b) By a partner, if a partnership (general partner, if a limited partnership); (c) By an officer, if a corporation or an association; or (d) By an attorney of the licensee, in case of physical disability or absence from the United States of the licensee.

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IMPRISONMENT.

U.S. CODE, TITLE 18, SECTION 1001.

I certify to the best of my knowledge, information and belief, all statements contained in this report are true and correct.

Signed

Mark S. Litton

Title

Vice President

Print Name

Mark S. Litton

Date

5/30/91

Telephone No.

(614) 792-2911

JUL- 3-93 SAT 13:32

WWHT/WTLT

FAX NO. 6148467385

P. 11

JUL- 2-93 FRI 16:57

WWHT/WTLT

FAX NO. 6148467385

P. 02

## TION V - EMPLOYEE DATA

FULL-TIME PAID EMPLOYEE DATA		MALE					FEMALE				
CATEGORIES	TOTAL (a-b)	WHITE (NOT HISPANIC) (c)	BLACK (NOT HISPANIC) (d)	HISPANIC (e)	ASIAN OR PACIFIC ISLANDER (f)	AMERICAN INDIAN, ALASKAN NATIVE (g)	WHITE (NOT HISPANIC) (h)	BLACK (NOT HISPANIC) (i)	HISPANIC (j)	ASIAN OR PACIFIC ISLANDER (k)	AMERICAN INDIAN, ALASKAN NATIVE (l)
OFFICIALS & MANAGERS	1	1									
PROFESSIONALS	9	5	1				3				
TECHNICIANS	2	2									
SALES WORKERS	3	2					1				
OFFICE & CLERICAL	4	2					2				
CRAFT WORKERS (SKILLED)											
OPERATIVES (SEMI-SKILLED)											
LABORERS (UNSKILLED)											
SERVICE WORKERS											
TOTAL	17	12	1				6				

PART-TIME PAID EMPLOYEE DATA		MALE					FEMALE				
CATEGORIES	TOTAL (a-b)	WHITE (NOT HISPANIC) (c)	BLACK (NOT HISPANIC) (d)	HISPANIC (e)	ASIAN OR PACIFIC ISLANDER (f)	AMERICAN INDIAN, ALASKAN NATIVE (g)	WHITE (NOT HISPANIC) (h)	BLACK (NOT HISPANIC) (i)	HISPANIC (j)	ASIAN OR PACIFIC ISLANDER (k)	AMERICAN INDIAN, ALASKAN NATIVE (l)
OFFICIALS & MANAGERS											
PROFESSIONALS	11	10					1				
TECHNICIANS											
SALES WORKERS											
OFFICE & CLERICAL											
CRAFT WORKERS (SKILLED)											
OPERATIVES (SEMI-SKILLED)											
LABORERS (UNSKILLED)											
SERVICE WORKERS											
TOTAL	11	10					1				

CERTIFICATE OF SERVICE

I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the original as the same appears in the records of the Court.

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]

\_\_\_\_\_  
[Signature]